

NEW JERSEY ACUTE CARE HOSPITALS
2002 COST REPORTS

Hospital: _____

Hospital Number: |_____| |_____| |_____| |_____|

COST CENTER DATA

Do not change any preprinted
wording on this form.

Cost Center			Hours (Whole Numbers (1, 2))			Costs (\$000's)									
			A	B	C	D	E	F	G	H	I	J	K	L	M
			Employee	Phys. Salaries	Phys. Fees	Salaries (2)		Phys. Fees (2)	Supplies (3)	Contract Services	Other Expense	Dep.&Fac Int. (4)	Lease Costs	Expense Rec. (5)	TOTAL COSTS
						Employee	Phys.								
1	MSA	Med/Surg Acute Care Units		////////	////////		////////	////////							MSA
2	PED	Pediatric Acute Care Units		////////	////////		////////	////////							PED
3	OBS	Obstetric Acute Care Units		////////	////////		////////	////////							OBS
4	PSA	Psych. Acute Care Units		////////	////////		////////	////////							PSA
5	ICU	Intensive Care Units (6)		////////	////////		////////	////////							ICU
6	CCU	Coronary Care Units		////////	////////		////////	////////							CCU
7	NNI	Neo-Natal Int. Care Units		////////	////////		////////	////////							NNI
8	NBN	Newborn Nursery		////////	////////		////////	////////							NBN
9	SNF	Skilled Nursing Facility		////////	////////		////////	////////							SNF
10	SAC	Sub Acute Care		////////	////////		////////	////////							SAC
11	CLN	Clinics													CLN
12	EMR	Emergency Room													EMR
13	OHS	Off-site Health Services													OHS
14	ANS	Anesthesiology													ANS
15	BBK	Blood Bank (7)													BBK
16	CCA	Cardiac Catheterization													CCA
17	CSS	Central Sterile Supply		////////	////////		////////	////////							CSS
18	MSS	Med/Surg Supplies Sold (8)	////////	////////	////////	////////	////////	////////		////////	////////	////////	////////	////////	MSS
19	DEL	Delivery Room/Labor Room		////////	////////		////////	////////							DEL
20	DIA	Dialysis (9)													DIA
21	EDG	Electrodiagnosis													EDG
22	LAB	Laboratory													LAB
23	NMD	Nuclear Medicine													NMD
24	ORR	Operating & Recovery Room		////////	////////		////////	////////							ORR
25	OPM	Other Physical Medicine													OPM
26	PHM	Pharmacy		////////	////////		////////	////////							PHM
27	DRU	Drugs Sold to Patients	////////	////////	////////	////////	////////	////////		////////	////////	////////	////////	////////	DRU
28	PHT	Physical Therapy													PHT
29	RAD	Radiology													RAD
30	RSP	Respiratory Therapy													RSP
31	THR	Therapeutic Radiology													THR
32	PHY	Physicians Coverage (6)								////////					PHY
33	RSD	Residents								////////					RSD
34	A&G	Administrative & General (10)		////////	////////		////////	////////							A&G
35	DTY	Dietary		////////	////////		////////	////////							DTY
36	FIS	Fiscal		////////	////////		////////	////////							FIS

Footnotes 1 through 13 – See Page 2 of 2.

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			A	B	C	D	E	F	G	H	I	J	K	L	M
			Employee	Phys. Salaries	Phys. Fees	Salaries (2)		Phys. Fees (2)	Supplies (3)	Contract Services	Other Expense	Dep.&Fac Int. (4)	Lease Costs	Expense Rec. (5)	TOTAL COSTS
						Employee	Phys.								
37	HKP	Housekeeping		////////	////////		////////	////////							HKP
38	L&L	Laundry and Linen		////////	////////		////////	////////							L&L
39	MAL	Malpractice Insurance	////////	////////	////////	////////	////////	////////	////////	////////		////////	////////		MAL
40	MRD	Medical Records		////////	////////		////////	////////							MRD
41	OGS	Other General Services		////////	////////		////////	////////							OGS
42	PCC	Patient Care Coordination													PCC
43	PLT	Plant		////////	////////		////////	////////							PLT
44	BLD	Building & Fixed Equipment	////////	////////	////////	////////	////////	////////	////////	////////	////////	(11)			BLD
45	UTC	Utilities	////////	////////	////////	////////	////////	////////	////////	////////		////////	////////		UTC
46	EDR	Education and Research													EDR
47	INT	Interest	////////	////////	////////	////////	////////	////////	////////	////////	(12)		////////		INT
48	LFB	Legal Fringe Benefits	////////	////////	////////	////////	////////	////////	////////	////////		////////	////////		LFB
49	PEN	Pensions	////////	////////	////////	////////	////////	////////	////////	////////		////////	////////		PEN
50	PFB	Policy Fringe Benefits	////////	////////	////////	////////	////////	////////	////////	////////		////////	////////		PFB
51	Subtotal (13)														
52	Reconciling Items (C-4 Totals)														
53	Total Institution (Lines 51 & 52)														

54	Total Operational Costs	(A) (Total Institution Cost Plus Expense Recovery Reported on Line 53) - - - - - - - -> -----> (B) (Attach an itemized detailed description if Line 56 is other than zero.) - - - - - - - ->	
55	Total Operational Cost Per Audited Financial)		
56	Difference (Line 54 minus 55) (B)		

- (1) FTE = 2080 hours per annum.

(2) Hours must be reported if salaries or fees are reported and vice versa.

(3) Supplies, net of supplies sold to patients.

(4) Report Major Moveable Equipment Depreciation Expense.

(5) This Column should include only the expense recoveries associated with other operating income and should equal C-5, Line 20, Revenue Column. Report all grant income offsets related to C Form costs.

(6) Report Burn Care non-physician costs in ICU and physician costs in PHY Provide detailed listing.
- (7) Report Blood Processing Costs in Blood Bank Contract Services.

(8) Report Pacemakers in the MSS Cost Center.

(9) Report total costs inclusive of inpatient and outpatient.

(10) Report Outside Collection Costs in Contract Service Column in A&G Cost Center.

(11) Report Building and Fixed Equipment Depreciation Expense.

(12) Include short term interest in the Interest Cost Center in the Other Expense Column.

(13) Report Rebundled Service Costs in the above using cost centers, Lines 1 through 31, and not in Reconciling Items Form C-4 or Line 51.